

Town of Holden Massachusetts

OFFICE OF THE CHIEF OF POLICE

APPLICATION FOR SOLICITOR / CANVASSER PERMIT

Please Print

APPLICATION DATE	
NAME	
TANE	
DATE OF BIRTH	
PERMANENT ADDRESS	
LOCAL ADDRESS, IF DIFFERENT	
LENGTH OF TIME DESIRED FOR PERMIT	
BRIEF DESCRIPTION OF NATURE OF BUSINES RENDERED, OR NATURE OF CONTRIBUTION	SS AND GOODS TO BE SOLD, SERVICES TO BE
APPLICANT'S EMPLOYER (IF SELF-EMPLOYED, SO STATE)	
HOME OFFICE ADDRESS	
HOME OFFICE PHONE NUMBER	
LOCAL PHONE NUMBER	
APPLICATION, EXCEPT VIOLATIONS OF MOT	E OR MISDEMEANOR WITHIN TEN YEARS OF DATE OF OR VEHICLE LAWS? E OFFENSE
IF OPERATING A MOTOR VEHICLE STATE: YE STATE AND NUMBER, VEHICLE OWNER'S NA	EAR, MAKE, MODEL, MOTOR NUMBER, REGISTRATION AME AND ADDRESS:
of the permit. If permit is not returned, the 3. A list of the streets to be covered will be su 4. Permit must be worn at all times in a visibl 5. Violation and Penalty: Any person violation	the Town of Holden, \$5.00 of which is refundable upon surrender \$5.00 deposit is forfeited. upplied to the Police Department on a daily basis.
	Holden Police Department
Signature of Applicant	By:
Permit ISSUED DENIED (Circle One)	Date:Title:
Date of Issue:	Expiration Date: December 31,